Effective October 1, 2003												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THA				
TC	OTAL CLAIMS		11					RATE	FEE	7	RATE	FEE
FO)A		NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			// minus 20=		·			XS 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		•			X43≖	1	OR	X86=	
ML	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT					+145=	 	OR	+290=	
* If the difference in column 1 is less than zero, enter *0* in						xotumn 2	ŧ	TOTAL	+	OR	TOTAL	770
CLAIMS AS AMENDED - PART II									<u> </u>]	OTHER	
		(Column 1)	(Colun	ານາ 2)	(Column 3)		SMALL	ENTITY	OR	SMALL		
AMENDMENT A	pred	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOW I	Total	• // .	Minus .	-d	0	= /		X\$ 9=		OR	X\$18=	
AME	Independent	· 2	Minus	en 2	5 AIM			X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						' [+145=		OR	+290=	
	× 4						L	TOTAL		OR	YOTAL ADDIT, FEE	
\bot	1:18.05	:18.05 (Column 1) (Column 2) (Column 3)						Opin. Tec	: •		ADDIT. 1 444	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHI NUME PREVIO PAID I	BER DUSLY	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	• //	Minus	- 2	'D	= /		X\$ 9=		OR	X\$18=	
AME	Independent	INTERPRESENTATION OF MULTIPLE DEPENDENT		T AIM	- /		X43=		OR	X86=	• /	
25, 40								+145=	7	OR	+290≑	7
-, ,								TOTAL ODIT. FEE		OR	YOTAL ADDIT, FEE	/
_		(Column 1)		(Colum	nn 2)	(Column 3)			l		•	Γ
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		FLIGHT NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL _FEE		RATE	ADDI- TIONAL FEE
Ž Ž	Total ·	•	Minus	ex		٥.		X\$ 9=		OR	X\$18=	
AME	Independent	•	Minus	***				X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								 	Un		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL OR ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE												
7	The "Highest Num	nber Previously Paid	J For' (Total or	Independe	ent) is the	highest number	r four	nd in the ap	spropriate box	ı in coh	umn 1.	

FORM PTO-975 (Rev. 10/03)

Paters and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Application or Docket Number

